## Case 17-81658 Doc 1 Filed 07/14/17 Entered 07/14/17 12:17:42 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ire identification (for nple, your driver's ise or passport).	Martin First name  J. Middle name	First name  Middle name
	iden	g your picture tification to your ting with the trustee.	West Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years	Marty West	
		ide your married or den names.		
3.	you num Indi	the last 4 digits of Social Security Seer or federal Vidual Taxpayer tification number	xxx-xx-9036	

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Case number (if known) Debtor 1 Martin J. West

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	2507 South Galena Trail Road	If Debtor 2 lives at a different address:
		Polo, IL 61064  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Ogle County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Martin J. West

ar	Tell the Court About	Your E	3ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by 1</i> fpage 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankru box.	ptcy	
	choosing to file under	Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee you	with the clerk's office in your local court for more irself, you may pay with cash, cashier's check, or if, your attorney may pay with a credit card or che	money	
						n, sign and attach the Application for Individuals to	o Pay	
			I request tha	nt my fee be wa		only if you are filing for Chapter 7. By law, a judger income is less than 150% of the official poverty		
			applies to you	ur family size ar	nd you are unable to pay the fee in	installments). If you choose this option, you must al Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the	■ N	lo.					
	last 8 years?	ΠY	es.					
			District	-	When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ N	lo					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.				
	residence :	ПΥ	es. Has yo	our landlord obta	ained an eviction judgment against	you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes. Fill out <i>In</i> bankruptcy per		udgment Against You (Form 101A) and file it with	this	

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Document Page 4 of 53 Case number (if known) Debtor 1 Martin J. West Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

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Debtor 1 Martin J. West

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Martin J. West		Docum		mber (if known)
Part	6: Answer These Quest	ions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are ersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are denvestment or through the operation of the	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts yo	u owe that are not consumer debts or bus	siness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	oter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be	7. Do you estimate that after any exempt available to distribute to unsecured credi	property is excluded and administrative expenses tors?
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-99		<b>5</b> 001-10,000	<b>5</b> 0,001-100,000
		☐ 100-19 ☐ 200-99	· ·	□ 10,001-25,000	☐ More than100,000
19.	How much do you	<b>=</b> \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
	30 11011111		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		<b>□</b> \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$ <u>\$</u>	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below				
For	you	I have ex	amined this petition, and I	declare under penalty of perjury that the in	nformation provided is true and correct.
				er 7, I am aware that I may proceed, if elig er relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				id not pay or agree to pay someone who id the notice required by 11 U.S.C. § 342(b	
		I request	relief in accordance with th	ne chapter of title 11, United States Code,	specified in this petition.
		bankrupto and 3571	cy case can result in fines u		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Marti Martin J	n J. West	Signature of De	ehtor 2
			of Debtor 1	Signature of Di	00.01.2
		Executed	on July 14, 2017	Executed on	
			MM / DD / YYYY		MM / DD / YYYY

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Debtor 1 Martin J. West Page 7 01 53

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A	A. Springer	Date ,	July 14, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Daniel A. S	Springer			
Printed name				
Springer L	aw Firm			
Firm name				
2222 E Sta	te St			
Suite 107				
Rockford,	IL 61104			
Number, Street, 0	City, State & ZIP Code			_
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com	
6314059				
Day acceptage 0 Ct	nto			

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ion to identify your	case:						
		Fill in this information to identify your case:					
Martin J. West							
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		OF ILLINOIS					
	First Name First Name	First Name Middle Name  First Name Middle Name	First Name Middle Name Last Name  First Name Middle Name Last Name				

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Ď	Communication Volum Access		
Par	t1: Summarize Your Assets	Your a	ussets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,280.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,280.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,331.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	110,525.00
	Your total liabilities	\$	120,856.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,849.69
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,794.24
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	. family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Martin J. West

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	4 000 04
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$ 1,960.04

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
From Part 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	2,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	55,494.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	57,494.00

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Debtor 1  Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the:    Martin J. West	
First Name Middle Name Last Name  Debtor 2 Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number	
	☐ Check if this is an amended filing
Official Form 106A/B	
Schedule A/B: Property	12/15
nink it fits best. Be as complete and accurate as possible. If two married people are filing too formation. If more space is needed, attach a separate sheet to this form. On the top of any aunswer every question.  Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an	additional pages, write your name and case number (if known).
Do you own or have any legal or equitable interest in any residence, building, land, or simil	lar property?
No. Go to Part 2.	
☐ Yes. Where is the property?	
Part 2: Describe Your Vehicles	
□ No ■ Yes  3.1 Make: Ford Who has an interest in the property? C	Do not deduct secured claims or exemptions. Put
Model: Escape Debtor 1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Year: 2008 □ Debtor 2 only	Current value of the entire property? Current value of the portion you own?
Approximate mileage: 178,000 Debtor 1 and Debtor 2 only	er
Approximate mileage:	\$3,750.00 \$3,750.00
Other information:  At least one of the debtors and another    Check if this is community property	Do not deduct secured claims or exemptions. But
Other information:  At least one of the debtors and another Check if this is community property (see instructions)  3.2 Make: Jeep  Who has an interest in the property? C	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Debtor 1 Martin J. West 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$8,000,00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Furniture** \$175.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$300.00 1 TV, 1 Cellphone, 1 Laptop Computer, 1 Tablet 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☐ No Yes. Describe..... \$1,000.00 **Movie Prop Collection** 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No ■ Yes. Describe..... \$400.00 Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ No

Official Form 106A/B Schedule A/B: Property page 2

■ Yes. Describe.....

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22. Security deposits and prepayments

☐ Yes. .....

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Case 17-81658 Doc 1 Filed 07/14/17 Entered 07/14/17 12:17:42 Desc Main Document Page 13 of 53 Debtor 1 Case number (if known) Martin J. West Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

Debtor 1	Case 17-81658  Martin J. West	Doc 1	Filed 07/14/17 Document	Entered 07/14/17 12:17:42 Page 14 of 53 Case number (if know	
■ No	nancial assets you did no Give specific information				
				ny entries for pages you have attached	\$5.00
Part 5: De	escribe Any Business-Related	d Property You	Own or Have an Interest	In. List any real estate in Part 1.	
No. Go	own or have any legal or equoto to Part 6. Go to line 38.	itable interest	in any business-related p	roperty?	
					Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	nts receivable or commis	ssions you alı	ready earned		
Examµ □ No □	equipment, furnishings, a ples: Business-related com		ire, modems, printers, co	opiers, fax machines, rugs, telephones, des	ks, chairs, electronic devices
	3d Prir	nter			\$400.00
■ No □ Yes.  11. Invento ■ No	nery, fixtures, equipment,  Describe  ory  Describe	supplies you	u use in business, and	tools of your trade	
12. Interes ■ No	sts in partnerships or join	t ventures			
☐ Yes.	Give specific information a	about them ne of entity:		% of ownership:	
■ No.	mer lists, mailing lists, or ur lists include personally id	·		S.C. § 101(41A))?	
	■ No □ Yes. Describe				

Official Form 106A/B Schedule A/B: Property page 5

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Deb	otor 1	Martin J. West		Case number (if known)	
45.		the dollar value of all of your entries from Part 5, includ		ges you have attached	\$400.00
Part		escribe Any Farm- and Commercial Fishing-Related Property Yo you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46.	Do yo	ou own or have any legal or equitable interest in any farn	n- or commercial fishir	ng-related property?	
	■ No	o. Go to Part 7.			
	□ Ye	ss. Go to line 47.			
Part	t <b>7</b> :	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
53.		ou have other property of any kind you did not already lis	st?		
	Exan	nples: Season tickets, country club membership			
_		. Give specific information			
		. Give opeoine information			
54.	Add	the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part	1: Total real estate, line 2			\$0.00
56.	Part	2: Total vehicles, line 5	\$8,000.00	_	
57.	Part	3: Total personal and household items, line 15	\$1,875.00		
58.	Part	4: Total financial assets, line 36	\$5.00		
59.	Part	5: Total business-related property, line 45	\$400.00		
60.	Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part	7: Total other property not listed, line 54	+\$0.00		
62.	Tota	Il personal property. Add lines 56 through 61	\$10,280.00	Copy personal property total	\$10,280.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$10,280.00

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			THE TAUC TO OLUG	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Martin J. West			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the	Property You	u Claim as	Exempt
-------------	------------	--------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
1994 Jeep Wrangler 158,000 miles Line from Schedule A/B: 3.2	\$4,250.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Line Horr Schedule A/D. 3.2			100% of fair market value, up to any applicable statutory limit		
Household Furniture Line from Schedule A/B: 6.1	\$175.00		\$175.00	735 ILCS 5/12-1001(b)	
Line Horr Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
1 TV, 1 Cellphone, 1 Laptop Computer, 1 Tablet	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Movie Prop Collection Line from Schedule A/B: 8.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
Line Holli Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit		
Used Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)	
Line nom Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit		

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Debtor 1 Martin J. West Case number (if known)

	of the property and line on lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Checking: First		\$5.00		\$5.00	735 ILCS 5/12-1001(b)
Line from General	aic AID. IIII			100% of fair market value, up to any applicable statutory limit	
3d Printer Line from Schedu	ulo A/P: <b>30 1</b>	\$400.00		\$175.00	735 ILCS 5/12-1001(b)
Line nom schedi	ule A/D. <b>33.1</b>			100% of fair market value, up to any applicable statutory limit	
•	g a homestead exemption tment on 4/01/19 and every			led on or after the date of adjustme	nt.)
☐ Yes. Did yo	u acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?
☐ No					
☐ Yes					

	Cas	e 17-81658	Doc 1	Filed 07/14/17 Document	Entere Page 18	ed 07/14/17 12:17: 3 of 53	42 Desc M	lain
Filli	n this informa	tion to identify you	ur case:					
Deb	tor 1	Martin J. West						
		First Name	Midd	dle Name	Last Name	_		
	tor 2 use if, filing)	First Name	Mido	dle Name	Last Name			
Unit	ed States Bank	ruptcy Court for the	: NORTHI	ERN DISTRICT OF ILL	INOIS			
Case (if kno	e number						_	if this is an led filing
	cial Form hedule D		s Who F	lave Claims (	Secure	d by Property		12/15
s nee						qually responsible for supply In the top of any additional p		
	•	ve claims secured b	y your proper	ty?				
ı	□ No. Check th	nis box and submit t	this form to th	e court with your other	schedules. Y	ou have nothing else to rep	oort on this form.	
		II of the information		,				
		Secured Claims	DOIOW.					
				1.	Pr	Column A Co	olumn B	Column C
for ea	ach claim. If more	e than one creditor has	s a particular cl	secured claim, list the cream, list the other creditors rding to the creditor's name	s in Part 2. As	Amount of claim  Do not deduct the that	lue of collateral at supports this aim	Unsecured portion If any
2.1	First State E Shannon	Bank of	Describe the	e property that secures t	he claim:	\$8,331.00	\$8,000.00	\$331.00
	Creditor's Name			d Escape 178,000 m p Wranger 158,000				
	PO Box 85 Shannon, IL	_ 61078	As of the da apply.	nte you file, the claim is:	Check all that			
	Number, Street, Ci	ty, State & Zip Code	Unliquida					
Who	owes the debt	? Check one.	☐ Disputed Nature of Ii	en. Check all that apply.				
	ebtor 1 only		_	ment you made (such as r	mortgage or se	cured		
_	ebtor 2 only		car loan	,	mongago or oo	04.04		
	ebtor 1 and Debt	or 2 only	☐ Statutory	lien (such as tax lien, med	chanic's lien)			
<b>A</b>	t least one of the	debtors and another	☐ Judgmen	nt lien from a lawsuit				
	heck if this clair community debt	n relates to a	Other (in	cluding a right to offset)				
Date	debt was incurr	ed 1/27/2017	Last	4 digits of account numb	oer			

Add the dollar value of your entries in Column A on this page. Write that number here: \$8,331.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$8,331.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 19 of	53		
Fill in this inf	ormation to identify your case	:				
Debtor 1	Martin J. West					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: NC	ORTHERN DISTRICT OF IL	LLINOIS			
Case number						
(if known)					l – .	if this is an led filing
Official Fo	orm 106E/F					
	E/F: Creditors Who	Have Unsecured	d Claims			12/15
Schedule G: Ex Schedule D: Cro left. Attach the on name and case	contracts or unexpired leases that ecutory Contracts and Unexpired leaditors Who Have Claims Secured Continuation Page to this page. If y number (if known).	Leases (Official Form 106G). by Property. If more space is you have no information to re	Do not include any c s needed, copy the Pa	reditors with partially s art you need, fill it out,	secured claims that a number the entries in	are listed in n the boxes on the
	ditors have priority unsecured cla					
☐ No. Go	to Part 2.					
Yes.						
identify what possible, lis Part 1. If me	rour priority unsecured claims. If a at type of claim it is. If a claim has bot at the claims in alphabetical order acc ore than one creditor holds a particul	th priority and nonpriority amou cording to the creditor's name. I ar claim, list the other creditors	unts, list that claim here If you have more than is in Part 3.	e and show both priority a two priority unsecured cl	and nonpriority amount	ts. As much as
(For an exp	lanation of each type of claim, see th	e instructions for this form in the	he instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1 <b>IRS</b>		Last 4 digits of acco	ount number	\$2,000.00	\$2,000.00	\$0.00
Cent PO B Phila	v Creditor's Name ralized Insolvency Operation Box 7346 Idelphia, PA 19101-7346				-	
	er Street City State Zlp Code	_	le, the claim is: Check	k all that apply		
■ Debto		☐ Contingent				
_	•	☐ Unliquidated				
☐ Debtor	· ·	☐ Disputed  Type of PRIORITY ur	nsecured claim:			
_	1 and Debtor 2 only	Domestic support				
_	is one of the debtors and another	_	other debts you owe the	ha gavarnment		
	im subject to offset?	_	or personal injury while	•		
■ No	• •	Other. Specify		,		
☐ Yes			ax Debt			
Part 2: Lis	t All of Your NONPRIORITY Ur	nsecured Claims				
	ditors have nonpriority unsecured					
	have nothing to report in this part. S	0 ,	h your other schedules	S.		
Yes.						
unsecured	rour nonpriority unsecured claims claim, list the creditor separately for enditor holds a particular claim, list the	each claim. For each claim liste	ed, identify what type of	f claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Part 2.

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Debtor 1 Martin J. West Case number (if know) 4.1 **Accelerated Receivables** Last 4 digits of account number \$110.00 Nonpriority Creditor's Name 2223 Broadway When was the debt incurred? Scottsbluff, NE 69361 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes 4.2 **Camelot Radiology** \$1,260.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? **PO BOX 1086** Indianapolis, IN 46206 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.3 Capital One Bank USA NA Last 4 digits of account number \$445.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes

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Debtor 1 Martin J. West Case number (if know) Commonwealth Edison 4.4 Last 4 digits of account number \$1.178.00 Nonpriority Creditor's Name Attn: System Credit/BK Dept. When was the debt incurred? 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes 4.5 **DirecTV** Last 4 digits of account number \$1,032.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other. Specify 4.6 Last 4 digits of account number \$8,050.00 **Kishwaukee Hospital** Nonpriority Creditor's Name When was the debt incurred? 1 Kish Hospital Drive DeKalb, IL 60115 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes

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Debtor 1 Martin J. West Case number (if know) 4.7 Medicredit Corporation Last 4 digits of account number \$234.00 Nonpriority Creditor's Name PO Box 1629 When was the debt incurred? Maryland Heights, MO 63043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes Mutual Management Services Co., \$113.00 4.8 LLC Last 4 digits of account number Nonpriority Creditor's Name 7177 Crimson Ridge Dr., Suite 10 When was the debt incurred? PO Box 8740 Rockford, IL 61126-6235 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collecting for Creditor** Other. Specify 4.9 \$55,494.00 Navient Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 9635 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify

Student Loans

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	000011 01000 2001	Document Page 23 of 53	, idiri
Debt	or 1 Martin J. West	Case number (if know)	
4.1	Prof Debt Mediation	Last 4 digits of account number	\$1,145.00
	Nonpriority Creditor's Name 7948 Baymeadows Way, 2nd Floor Jacksonville, FL 32256	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.1 1	Progressive Insurance	Last 4 digits of account number	\$105.00
	Nonpriority Creditor's Name 6300 Wilson Mills Road Cleveland, OH 44143	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Fees	
4.1	Rochelle Community Hospital	Last 4 digits of account number	\$110.00
	Nonpriority Creditor's Name	Last 4 digits of account number	<b>VIII.010</b>
	900 North Second Street Rochelle, IL 61068	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Medical Bills

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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Document Page 24 of 53 Debtor 1 Martin J. West Case number (if know) 4.1 **Rockford Health System** \$5,975.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 **Rockford Radiology** \$619.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 **Security Finance Corporation** \$2,015.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 3146 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Personal Loan

report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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\$1,587.00
\$1,367.00
you did not
\$30,000.00
you did not
\$1,053.00
you did not

### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Martin J. West		Case number (if know)
Name and Address Accelerated Receivables 2223 Broadway Scottsbluff, NE 69361	On which entry in Part 1 or Part 2 did y Line 4.12 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Contract Callers Inc. Attn: Bankruptcy Dept. 501 Greene Street 3rd Floor Ste 302 Augusta, GA 30901	On which entry in Part 1 or Part 2 did the Line 4.4 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Colection Services PO Box 607 Norwood, MA 02062	On which entry in Part 1 or Part 2 did the Line 4.11 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101	On which entry in Part 1 or Part 2 did Line 4.2 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241	Last 4 digits of account number  On which entry in Part 1 or Part 2 did y Line 4.5 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	Con which entry in Part 1 or Part 2 did to Line 4.6 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part 2 did the Line 4.6 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Receivables Management Partners 2350 East Devon Des Plaines, IL 60018	On which entry in Part 1 or Part 2 did Line 4.6 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did the Line 4.13 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address TransUnion 555 West Adams Street Chicago, IL 60661	Last 4 digits of account number  On which entry in Part 1 or Part 2 did the Line 4.6 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Martin J. West

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 55,494.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 55,031.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 110,525.00

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		DUGUITE	11 FAUE 20 01 33	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Martin J. West			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	-,				

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		Document	Page 29 of 53	
Fill in this	information to identify your	case:		
Debtor 1	Martin J. West			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS	
Case num	ber			☐ Check if this is an amended filing
	l Form 106H <mark>Iule H: Your Cod</mark>	ebtors		12/15
people are fill it out, a your name	filing together, both are equ nd number the entries in the and case number (if known)	ally responsible for supplyi boxes on the left. Attach th ). Answer every question.	ng correct information. If more	e and accurate as possible. If two married re space is needed, copy the Additional Page. On the top of any Additional Pages, write
□ No				
Yes	3			
			erty state or territory? (Commu o Rico, Texas, Washington, and	unity property states and territories include l Wisconsin.)
■ No.	Go to line 3.			
☐ Yes	s. Did your spouse, former spor	use, or legal equivalent live wi	th you at the time?	
in line Form	e 2 again as a codebtor only i	if that person is a guarantor	or cosigner. Make sure you ha	ouse is filing with you. List the person shown nave listed the creditor on Schedule D (Officia Schedule D, Schedule E/F, or Schedule G to f
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		nn 2: <b>The creditor to whom you owe the debt</b> call schedules that apply:
	Matthew West 7044 South West Street Rochelle, IL 61068		■ Sch □ Sch □ Sch	hedule D, line <b>2.1</b> hedule E/F, line hedule G State Bank of Shannon

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	in this information to identify your control										
Dei	otor 1 Martin J. We	est				_					
	btor 2  buse, if filing)					_					
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILL	INOIS		_					
l	se number nown)		-				□ An				
$\bigcirc$	fficial Form 106l									lowing date	<del>с</del> .
	chedule I: Your Inc	omo					MN	M / DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing wi	ith you, d	lo not inclu	de infori	mati	on about	your spo	use. If mor	re space is	s needed,
1.	Fill in your employment information.		Debtor	1				Debtor 2	or non-fili	ng spous	e
	If you have more than one job,	Employment status	■ Employed					☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed					☐ Not e	mployed		
	employers.	Occupation	CNA								
	Include part-time, seasonal, or self-employed work.	Employer's name	KSB I	lospital							
	Occupation may include student or homemaker, if it applies.	Employer's address		ast First S , IL 61021	treet						
		How long employed t	here?	4 mont	hs			_			
Pai	rt 2: Give Details About Mor	nthly Income									
spoo	mate monthly income as of the duse unless you are separated.	ore than one employer, co	•	ŭ						·	ŭ
mor	e space, attach a separate sheet to	this form.									
							For Debt	tor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	2,5	555.78	\$	N/A	<u> </u>
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	<u>\</u>

2,555.78

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Martin J. West		(	Case	number (if kn	own)				
					For	Debtor 1			Debtor		
	Сор	y line 4 here	4.		\$_	2,555	.78	\$	9	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	56 50 50 56 5f 5g	). ;. d. e.	\$ \$ \$ \$ \$	0 0 0 134 0	.63 0.00 0.00 0.00 0.46 0.00	\$		N/A N/A N/A N/A N/A N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0	.00	+ \$ _		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	706	.09	\$_		N/A	<u> </u>
7. 8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm	7.		\$_	1,849	.69	\$_		N/A	<u>.</u>
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88		\$_		.00	\$_		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b		\$_ \$		0.00	\$_ \$		N/A N/A	_
	8d.	Unemployment compensation	80		\$_		.00	\$_		N/A	_
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	86 8f		\$_ \$		0.00	\$_ \$		N/A N/A	_
	8g.	Pension or retirement income	_ 8g		\$		.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0	.00	+ \$_		N/A	<u>.</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	0	0.00	\$_		N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		1,849.69	+ \$_		N/A	= \$ _	1,849.69
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule are contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•				e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	1,849.69
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
	_	No. Yes Eynlain									

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=:III	in this informati	tion to identify yo	our caca:			ı				
	otor 1	Martin J. We				Ch	neck if this			
Deb	otor 2							nded filing ement shov	wing postpetition chapter	
(Spo	ouse, if filing)								the following date:	
Unit	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	IOIS		MM / D	D / YYYY		
l	e number nown)									
Oi	fficial Fo	rm 106J								
Sc	chedule	J: Your I	Expen	ises					12 <i>/</i> -	15
Be info	as complete a	and accurate as	possible. eded, atta	If two married people and the control of the contro						
		ibe Your House	hold							
1.	Is this a join									
	■ No. Go to	line 2. <b>s Debtor 2 live i</b>	in a sonar	ate household?						
	□ 163. <b>D06</b> .		iii a sepair	ate nousenoiu:						
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of D	ebtor 2.			
2	De veu beve	a demandanta?	<b>=</b>							
2.	•	e dependents?	■ No				_			
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dep age	endent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents								☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	Do vour exp	enses include	_	No					□ Yes	
	expenses of	f people other to d your depende	han $_{oldsymbol{\square}}$	Yes						
		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
the		n assistance and		government assistance i luded it on <i>Schedule I:</i> '				Your exp	enses	
,011	1 01111 10	<del>~,</del>								
4.		r home owners ad any rent for the		<b>ses for your residence.</b> I r lot.	Include first mortgage		\$		250.00	
	If not includ	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
		rty, homeowner's				4b.	·		0.00	
				pkeep expenses		4c.			0.00	
5.		owner's associat nortgage payme		dominium dues o <b>ur residence,</b> such as ho	ome equity loans	4d. 5.	\$ \$		0.00 0.00	
٠.			y u	<del></del>	oquity louiso	٥.	*		3.00	

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ebtor 1 Martin J. We	est	Case numb	oer (if known)	
. Utilities:				
6a. Electricity, hea	t. natural gas	6a.	\$	0.00
•	garbage collection	6b.	\$	0.00
	I phone, Internet, satellite, and cable services	6c.	·	71.00
6d. Other. Specify	•	6d.		0.00
			\$	
Food and housekee		7.	·	350.00
	ren's education costs	8.	\$	0.00
Clothing, laundry, a	· ·	9.	\$	75.00
. Personal care produ		10.	\$	50.00
. Medical and dental	•	11.	\$	25.00
<ul> <li>Transportation. Include car pa</li> </ul>	ude gas, maintenance, bus or train fare.	12.	\$	300.00
	s, recreation, newspapers, magazines, and books	13.	\$	75.00
	tions and religious donations		\$	0.00
. Insurance.	nons and religious donations	14.	Φ	0.00
	ince deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	inoc acadeted from your pay or included in lines 4 of 20.	15a.	\$	0.00
15b. Health insuran	ce	15b.		0.00
15c. Vehicle insurar		15b. 15c.	·	152.84
			*	
15d. Other insurance	· · · · · · · · · · · · · · · · · · ·	15d.	Φ	0.00
Specify:	e taxes deducted from your pay or included in lines 4 or 2		\$	0.00
<ul> <li>Installment or lease</li> <li>17a. Car payments</li> </ul>		170	¢	205.40
		17a.	·	295.40
17b. Car payments		17b.	·	0.00
17c. Other. Specify		17c.	*	0.00
17d. Other. Specify		17d.	\$	0.00
	limony, maintenance, and support that you did not represent pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
	make to support others who do not live with you.	1001).	\$	0.00
Specify:	, ,	19.	<u> </u>	0.00
	expenses not included in lines 4 or 5 of this form or o		ur Income.	
20a. Mortgages on		20a.		0.00
20b. Real estate tax		20b.	·	0.00
	eowner's, or renter's insurance	20c.	·	
				0.00
	repair, and upkeep expenses	20d.		0.00
	association or condominium dues	20e.	·	0.00
. Other: Specify: B	irthdays/Holidays/Haircuts	21.	+\$	150.00
. Calculate your mon	thly expenses			
22a. Add lines 4 thro	ugh 21.		\$	1,794.24
22b. Copy line 22 (m	onthly expenses for Debtor 2), if any, from Official Form 1	06J-2	\$	· · · · · · · · · · · · · · · · · · ·
	d 22b. The result is your monthly expenses.		\$	1,794.24
ZZO. MUU IIIIG ZZO AIII	2225. The result is your monthly expenses.		Ψ	1,134.24
<ol> <li>Calculate your mon</li> </ol>				
	your combined monthly income) from Schedule I.	23a.	\$	1,849.69
23b. Copy your mor	nthly expenses from line 22c above.	23b.	-\$	1,794.24
00- 0-11	and the same of th	]		
	nonthly expenses from your monthly income. our <i>monthly net income</i> .	23c.	\$	55.45
·	crease or decrease in your expenses within the year	after vou file this	form?	
	pect to finish paying for your car loan within the year or do you exp			se or decrease because o
■ No.				
	plain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Martin J. West				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
<u>Declarat</u>	tion About a	an Individua	Debtor's S	chedules	12/15
If two married n	eonle are filing togethe	r, both are equally respo	onsible for supplying co	rrect information	
	copie and iming regenie	.,	g cappijg ca		
You must file thi	is form whenever you fi	ile bankruptcy schedule	s or amended schedule	s. Making a false state	ment, concealing property, or
			kruptcy case can result	in fines up to \$250,000	0, or imprisonment for up to 20
years, or both. 1	18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
Sig	n Below				
Did you pa	ay or agree to pay some	eone who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
□ Voc	Name of person			Attach Pank	ruptcy Petition Preparer's Notice,
☐ Yes. I	name or person				and Signature (Official Form 119)
				,	,
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules fi	ed with this declaratio	n and
X /s/ Mar					
	rtin J. West		X		
	rtin J. West ı J. West		X Signature o	of Debtor 2	
Martin				of Debtor 2	

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Fill in						
	this inform	nation to identify you	ır case:			
Debto	or 1	Martin J. West				
Debto	nr 2	First Name	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	nkruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS		
Case	number					
(if knov	_					☐ Check if this is an
						amended filing
Ott:	oial Eau	rm 107				
	<u>cial Fo</u>		Affairs for Indiv	iduals Filing fo	r Bankruntev	4/10
			sible. If two married people			
inforn	nation. If m	ore space is needed	, attach a separate sheet t			s, write your name and case
numb	er (if known	n). Answer every que	estion.			
Part '	Give D	etails About Your M	arital Status and Where Yo	ou Lived Before		
1. V	Vhat is your	current marital stat	us?			
[	☐ Married					
•	Not mar	ried				
2. C	Ouring the la	ast 3 years, have you	ı lived anywhere other tha	n where you live now?		
г	□ No					
Ī		t all of the places you	lived in the last 3 years. Do	not include where you live	e now.	
		ior Address:	Dates Debtor	·		Dates Debtor 2
			lived there	T DOUGH Z T TH	or Address.	lived there
	1364 Soutl Polo, IL 61	h Lowell Park Roa 064	d From-To: 8/1/2016 - 6/3	☐ Same as De <b>2017</b>	ebtor 1	☐ Same as Debtor 1 From-To:
-	1305 North	n Annie Glidden R	oad. From-To:	☐ Same as De	phtor 4	☐ Same as Debtor 1
	Apt. 1626		11/2014 - 8/2		eblor 1	From-To:
	DeKalb, IL	60115				
			ver live with a spouse or la lifornia, Idaho, Louisiana, N			or territory? (Community property oton and Wisconsin.)
	<b>.</b>					,
-	■ No T Ves Ma	ke sure vou fill out So	hedule H: Your Codebtors (	Official Form 106H)		
	- 100. Ma	ine sare you iii out oo	ricadic II. Tour Codebiers (	omolari omi roorij.		
Part 2	Explain	n the Sources of You	ur Income			
F	ill in the tota	I amount of income yo	mployment or from operatou received from all jobs and have income that you rece	d all businesses, including	part-time activities.	rious calendar years?
	□ No					
г	- 110					
[	Yes. Fill	in the details.				
[	Yes. Fill	in the details.	Dalifar (		D 14 -	
[	Yes. Fill	in the details.	Debtor 1 Sources of income	Gross income	Debtor 2 Sources of inco	ome Gross income

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Debtor 1 Martin J. West

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of inc		Gross income (before deductions and exclusions)
		/ 1 of currei filed for bar	nt year until kruptcy:	■ Wages, commissions, bonuses, tips	\$11,760.2	26 ☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	last calen	dar year: December	31, 2016 )	■ Wages, commissions, bonuses, tips	\$24,799.0	00 ☐ Wages, conbonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$18,719.0	D4 ☐ Wages, conbonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	■ No	source and t	-	me from each source separat	ely. Do not include incon	ne that you listed in li	ne 4.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions an exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3: List	t Certain Pa	vments You	Made Before You Filed for E	,			
6.	Are either No.	Neither Deindividual puring the No.	pettor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, did ach creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	mer debts. Consumer of purpose."  If you pay any creditor a dia total of \$6,425* or mosts for domestic support on bankruptcy case.	total of \$6,425* or mo ore in one or more pa obligations, such as c	ore? lyments and th hild support ar	ne total amount you nd alimony. Also, do
	■ Yes.			r both have primarily consure you filed for bankruptcy, did		total of \$600 or more	?	
		□ No. ■ Yes	include pay	ach creditor to whom you paid ments for domestic support ob this bankruptcy case.	d a total of \$600 or more oligations, such as child s	and the total amount support and alimony.	: you paid that Also, do not ii	creditor. Do not nclude payments to an
	Creditor'	's Name and	d Address	Dates of paymen	nt Total amount		Was this p	ayment for

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Case number (if known) Debtor 1 Martin J. West

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
	First State Bank of Shannon	6/2017 - 7/2017	\$737.40	\$8,331.00	☐ Mortgage ☐ Car ☐ Credit Car ☐ Loan Rep ☐ Suppliers ☐ Other	ayment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. I alimony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporations ent, including one for
	<ul><li>No</li><li>☐ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	his payment
			paid	still owe	Include credit	or's name
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title					or custody
	Case number					
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnis	hed, attached	seized, or levied?  Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed  No  Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any aı	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess	ion of an assigne	e for the benef	it of creditors, a

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Case number (if known) Document Debtor 1 Martin J. West

Pa	rt 5: List Certain Gifts and Contribution	ns			
13.	Within 2 years before you filed for banks  No  Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	i			
14.	Within 2 years before you filed for banks  ■ No  □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?  ■ No □ Yes. Fill in the details.	iptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	t, fire, other disaster,
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfer	s			
16.	consulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not N	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org		\$14.95	7/5/2017	\$14.95
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		\$500.00	7/2017	\$500.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Martin J. West

18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your kinclude both outright transfers and transfers minclude gifts and transfers that you have alread No  Yes. Fill in the details.	ousiness or financial affa nade as security (such as	airs? the granting of a sec		
	Person Who Received Transfer Address	Description and very property transfer		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you  Matthew West	1992 Ford Expl	orer, \$1,000	\$150	3/2017
	Brother				
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a sel	lf-settled trust or similar device	of which you are a
	Name of trust	Description and v	value of the proper	ty transferred	Date Transfer was made
	Within 1 year before you filed for bankruptor sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	cy, were any financial ac or other financial accou	counts or instruments; certificates of	ents held in your name, or for y deposit; shares in banks, cred  or Date account was closed, sold,	it unions, brokerage  Last balance before closing or
21.	Do you now have, or did you have within 1	year before you filed for	r bankruptcy, any s	moved, or transferred safe deposit box or other depos	transfer sitory for securities,
	cash, or other valuables?  ■ No □ Yes. Fill in the details.	,	, ,,		·
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit  ■ No □ Yes. Fill in the details.	or place other than you	r home within 1 yea	ar before you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	19: Identify Property You Hold or Contro	I for Someone Else			
23.	Do you hold or control any property that so for someone.	omeone else owns? Incl	ude any property y	rou borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value

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Debtor 1 Martin J. West

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance

_	regi	ulations controlling the cleanup of these	e substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
		<i>tardous material</i> means anything an env ardous material, pollutant, contaminant		waste, hazardous substance, toxic	substance,				
Rep	ort a	III notices, releases, and proceedings th	at you know about, regardless of when	they occurred.					
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable	under or in violation of an environn	nental law?				
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	re you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	re you been a party in any judicial or adr	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.				
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business						
27.	Witl	— hin 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to ar	ny business?				
		☐ A sole proprietor or self-employed i	in a trade, profession, or other activity,	either full-time or part-time					
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
■ No. None of the above applies. Go to Part 12.									
		Yes. Check all that apply above and fil	I in the details below for each business	i.					
	Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification numb Do not include Social Security					
	(NUI	mider, Suleet, Gity, State and AIP Gode)	Name of accountant or bookkeeper	Dates business existed					

Document Page 41 of 53 Case number (if known) Debtor 1 Martin J. West 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Martin J. West Signature of Debtor 2 Martin J. West Signature of Debtor 1 Date Date July 14, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Filed 07/14/17

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Fill in this inform	mation to identify your	case:				
Debtor 1	Martin J. West					
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIST	TRICT OF ILLI	NOIS		
Case number						
(if known)						☐ Check if this is an amended filing
Official Fo	rm 108					
Statemer	nt of Intentio	n for Indiv	<u>iduals</u>	Filing Under	Chapter	7 12/15
If you are an indi	ividual filing under cha	nter 7 vou must fill	l out this forn	n if:		
•	e claims secured by yo		i out tills form			
you have leas	sed personal property a	nd the lease has n				
	ever is earlier, unless th					r the meeting of creditors, editors and lessors you list
	eople are filing togethened the community of the community of the form.	in a joint case, bo	th are equally	responsible for supply	ing correct inform	mation. Both debtors must
	and accurate as possib our name and case nur		needed, atta	ch a separate sheet to	this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims				
			· Creditors W	ho Have Claims Secure	ed by Property (O	fficial Form 106D), fill in the
information be	elow.					
identity the cre	editor and the property t	nat is collateral	secures a	ou intend to do with the debt?	property that	Did you claim the property as exempt on Schedule C?
Creditor's <b>F</b>	irst State Bank of Sh	annon	□ Surrende	er the property.		□ No
name:				he property and redeem	it.	_
Description of	2008 Ford Escape	178.000 miles		ne property and enter into	а	Yes
property	1994 Jeep Wrange			nation Agreement. ne property and [explain]:		
securing debt:	miles					
Part 2: List Yo	our Unexpired Persona	I Property Leases				
For any unexpire	ed personal property le	ase that you listed				eases (Official Form 106G), fill
				es not assume it. 11 U.		ase period has not yet ended.
Describe your u	nexpired personal pro	perty leases			<b>W</b> i	ill the lease be assumed?
Lessor's name:					п	No
Description of lea	ased					NO
Property:						Yes
Lessor's name:						No
Description of lea Property:	ased					Yes
Lessor's name:						No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1	Martin J. West	Case number (if known)
	on of leased	
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's		□ No
Property:	on of leased	☐ Yes
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicated r that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
	Martin J. West	x
	tin J. West ature of Debtor 1	Signature of Debtor 2
Date	July 14, 2017	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81658 Doc 1 Filed 07/14/17 Entered 07/14/17 12:17:42 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In r	e Martin J. West		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy, o	or agreed to be paid	to me, for services rer	ndered or to
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received	d	\$	500.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person u	inless they are mem	pers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy c	ase, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate to the control of the</li></ul>	atement of affairs and plan which items and confirmation hearing, and reduce to market value; exertions as needed; preparation a	may be required; I any adjourned hea mption planning;	rings thereof;	ling of
б.	522(f)(2)(A) for avoidance of liens on h  By agreement with the debtor(s), the above-disclosed f  Representation of the debtors in any d any other adversary proceeding.	fee does not include the following		es, relief from stay	actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for p	payment to me for re	epresentation of the de	ebtor(s) in
	July 14, 2017	/s/ Daniel A. Sprin			
1	Date	Daniel A. Springer			
		Signature of Attorney Springer Law Firm			
		2222 E State St			
		Suite 107 Rockford, IL 6110	1		
		815.312.4725	•		
		dspringerlaw@gm	ail.com		
		Name of law firm			

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 7/10/17	
Signature: Martin West Print Name: MARTIN West	Attorney Signature:  Attorney Print: 5pt. 3N

# **United States Bankruptcy Court Northern District of Illinois**

-	Mantin I Minat		C. N	
In re	Martin J. West	Debtor(s)	Case No. Chapter 7	
	VE	ERIFICATION OF CREDITOR M	IATRIX	
		Number of Creditors: 30		
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of credit	tors is true and correct to t	he best of my
Date:	July 14, 2017	/s/ Martin J. West  Martin J. West  Signature of Debtor		

Accelerated Receivables 2223 Broadway Scottsbluff, NE 69361

Camelot Radiology Attn: Bankruptcy Department PO BOX 1086 Indianapolis, IN 46206

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Commonwealth Edison Attn: System Credit/BK Dept. 3 Lincoln Center 4th Floor Oakbrook Terrace, IL 60181

Contract Callers Inc. Attn: Bankruptcy Dept. 501 Greene Street 3rd Floor Ste 302 Augusta, GA 30901

Credit Colection Services PO Box 607 Norwood, MA 02062

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

DirecTV Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Equifax PO Box 740256 Atlanta, GA 30374 Experian PO Box 4500 Allen, TX 75013

First State Bank of Shannon PO Box 85 Shannon, IL 61078

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Kishwaukee Hospital 1 Kish Hospital Drive DeKalb, IL 60115

Matthew West 7044 South West Street Rochelle, IL 61068

Medicredit Corporation PO Box 1629 Maryland Heights, MO 63043

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Navient PO Box 9635 Wilkes Barre, PA 18773

Prof Debt Mediation 7948 Baymeadows Way, 2nd Floor Jacksonville, FL 32256

Progressive Insurance 6300 Wilson Mills Road Cleveland, OH 44143

Receivables Management Partners 2350 East Devon Des Plaines, IL 60018 Rochelle Community Hospital 900 North Second Street Rochelle, IL 61068

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304

TransUnion 555 West Adams Street Chicago, IL 60661

Verizon Wireless Attn: Bankruptcy Dept. PO Box 26055 Minneapolis, MN 55426

William R Ritchey 1364 South Lowell Park Rd. Polo, IL 61064

World Finance Company PO Box 6429 Greenville, SC 29606